

Title: Contraceptive use threatens and preserves marriageability and marital stability: Evidence from a qualitative study in rural Malawi

Introduction

In the context of rural Malawi, the decision to use, or not use, modern contraception is not about avoiding a pregnancy. The decision is instead driven by concerns about relationships – partner, familial, and community relationships. Much of the family planning literature focuses on reasons for and barriers to contraceptive use (Casterline and Sindig 2000; Campbell et al. 2006; Sedgh et al. 2007; Levandowskia et al. 2012; Darroch et al. 201; Henderson et al. 2013). While it would be nonsensical to argue that contraceptive use has no relationship to the avoidance of pregnancy, we argue here that the desire to avoid pregnancy, in and of itself, is not the central decision a woman or man is making when thinking about the use of contraception. We argue that larger, more salient life goals are under at stake in contraceptive use decisions. Rational choice models of fertility such as Easterlin’s Synthesis Framework (1975) identify fertility determinants as functions of the utility of childbearing. Viewed in this way, the reasons for non-use of contraception in low-resource settings can seem irrational. We were struck by the ways in which women and men in rural Malawi consistently detailed the health and livelihood benefits of contraception while at the same time describing why they and others decide not to use contraception. Are their reasons for non-use truly contradictory or irrational in light of their broader life goals? Luker (1975) takes on the apparent “irrationality” of unplanned pregnancy in her Theory of Contraceptive Risk-Taking explaining non-use in the context of partner and social dimensions. The present paper draws on these two approaches to argue that a portion of the apparent contradictions between reasons for non-use and behavior become highly rational when viewed in light of more salient life goals. The goal of contraceptive use is not avoidance of pregnancy, in and of itself, but rather maintenance of existing relationships both for their livelihood implications as well as their implications for social and individual identity construction.

Ultimately, our evidence calls for a cross-theoretical approach to incorporate ideas from the various literatures of family (regarding marital stability), partner dynamics, and family planning (reasons for non-use).

Data and Methods

The qualitative data used in this analysis was collected during the summer of 2013 as the first stage of a community-based, longitudinal survey project in rural Malawi. Participants were recruited from the catchment area of an INGO clinic serving a population of roughly 4,000 households in rural Malawi. The vast majority of households rely on subsistence farming, with casual labor and small business as additional means of economic support.

We conducted focus group discussions (9 groups of women, 4 groups of men) stratified by marital status, as well as 29 in-depth interviews (23 women, 6 men) to explore attitudes and behaviors surrounding contraceptive use, pregnancy avoidance, and childbearing. Participants were recruited by Health Surveillance Assistants (HSAs), government health extension workers who monitor and administer maternal and child health services within a given allocation of villages. HSAs worked in conjunction with village chiefs and headman in twelve villages to identify groups of participants who fit the sampling criteria as determined by the first author.

Interviewing and focus group facilitation was done by Malawian research assistants who have extensive experience in qualitative research methods.

All interviews and focus groups were audio recorded and then transcribed and translated from Chichewa to English by the Malawian interviewers. Preliminary data analysis was conducted by hand with subsequent, in-depth analysis being conducted with Nvivo by multiple coders to achieve greater reliability and validity of emergent themes.

Findings

Perceived consequences of contraceptive use and pregnancy avoidance more generally, highlight a complex set of negotiations which are undertaken by men and women when making fertility-related decisions. The particular set of negotiations is highly dependent on relationship status.

Before Marriage

Arguably the life stage least likely to correlate with high levels of effective contraceptive uptake is that of young, never-married individuals. The two most emphasized reasons for non-use of modern contraception before marriage relate to social perception and future marital stability. With respect to social perception, the use of contraception prior to marriage signals promiscuity; labels of “prostitute” were directed towards young never-married women users of contraception. For this reason, this group used pregnancy avoidance strategies that were most easily concealed and kept anonymous. Secondly, highly effective contraception is seen to be a threat to future marital stability due to the potential for delayed conception upon marriage, or total infertility leading to childlessness. Strong social norms indicate that couples should conceive within 6 months of marriage. Thus, many women describe delayed return to fertility as a primary reason for not using hormonal methods of contraception prior to marriage. On numerous accounts, the inability to conceive immediately was described as a “threat to marriage.”

While the threats to marriageability are high among never-married women, there are also high costs associated with non-use, particularly when the woman is remaining in school. With the expansion of education for women since the 1990s, education is beginning to offer new aspirations and goals for women. Unplanned pregnancy “dooms a woman’s future” and reduces her social support. For this reason, FGD and IDI participants were often conflicted as to whether or not young women should use contraception. On the one hand, contraceptive use threatens future fertility. On the other hand, unplanned pregnancy ruins future opportunities.

Within Marriage

Once married, couples are expected to conceive quickly; relatives and other community members wait approximately six months before suggesting fertility treatments and strategies. To use contraception just after marriage would be highly non-normative; such use would be a signal between partners of a high probability of infidelity. Marriage and childbearing are closely intertwined in large part because adulthood corresponds to parenthood. It is the identity of “mother” which many women described as bringing the transition to adult status and changes to social circles. Without having a child, a woman is viewed as a “minor” and cannot relate or converse with mothers, even if those women are of similar age. Most men and women agreed that after two children that a couple could begin to consider the use of contraception. Prior to

having two children, contraceptive use would threaten marital stability by preventing proof of fertility, and signaling infidelity.

After having two children, the decision to contracept is contested by a fear of side effects. However, side effects were not viewed as barrier to use simply because of the health concerns. In many cases, the side effects described were prolonged menstruation or reduced libido. These side effects threaten the frequency and quality of sexual relations, and thus were particularly problematic, raising the likelihood that husbands would seek extramarital partners in order to meet their sexual needs. Indeed, participants offered personal accounts of husbands seeking extra partners or taking on additional wives in response to the women's decision to contracept.

While contraceptive use appears to threaten marital stability, a contradiction arises due to contraception's ability to preserve marital quality as well. Contraceptive use is thought to make women "more beautiful" – an important variable for holding on to a husband's affections. Furthermore, contraceptive use (and resultant reduction childbearing frequency) was linked to more time and freedom to develop the household, take care of children, and increase the frequency of intercourse, ultimately strengthening all relationships in the household.

Post-Marriage

For divorced or widowed women, contraceptive use threatened their marriageability by signaling promiscuity, similar to young, never-married women. However, a higher degree of censure was given to "women who know the consequences within marriage" and still chose to "steal husbands" by engaging in sexual activity. This social label was weighed in light of the potential economic benefits that could be secured through a lover, also putting at risk the chance of future marriage.

Discussion

Overall, the consequences that men and women cited for the use of contraception, and pregnancy avoidance more generally, revolved around the relational implications for partners, family, and the broader community. Contraceptive use was seen to threaten a future marriage through the immediate label of "prostitute" and the future risk of delayed conception. On the other hand, contraceptive use could preserve marriageability by allowing sexually active girls to continue with their education, thereby securing future opportunities and continued familial support. For married women, the use of contraception prior to the birth of a first child denies the transition to adulthood; use prior to a second child threatens the marriage and may signal infidelity. After the second birth, side effects of contraception – particularly those with direct implications for the frequency and quality of the sexual experience – threaten relationship quality and increase the likelihood of infidelity or polygamy. On the other hand, contraceptive use leads to a healthier, more beautiful woman thereby strengthening a woman's ability to maintain her husband's affections. Finally, for women who have divorced or are widows, contraceptive use threatens their social position via strong labels of prostitution and "stealing husbands," counteracted only the possibility for current livelihood assistance from a lover. At every life stage, contraceptive use both threatens and preserves relationship stability, thereby creating a complex set of negotiations that individuals must navigate in their decisions of whether or not to avoid pregnancy. In the end, the decision is not whether or not to avoid a pregnancy, but whether or not to put a current relationship, or future marriage, at risk of dissolution.

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